

Attorney Docket No. 81784.0239 Customer No. 26021 RECEIVED

OCT 0 4 2004

## Technology Center 2100

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Naoyuki OGINO

Serial No.: 09/893,032

Confirmation No.: 3402

Filed:

June 26, 2001

For:

SIGNAL PROCESSING CIRCUIT

AMENDMENT

Mail Stop RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

I hereby certify that this paper and every paper referred to herein is being transmitted via facsimile to recipient at (703) 872-9306 on:

September 27, 200

Date of Facsimile Transmission

Art Unit: 2188

Examiner: Inoa, Midys

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P.O. Box 1450

Alexandria, VA 22313-1450

September 27, 2004

Date of Deposit

ohn P. Scheracher, Reg. No. 23,009

10h 0 09/25/04 gnature

In conjunction with an RCE (Request for Continued Examination) being filed concurrently herewith, and responsive to the Final Office Action of March 25, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

Best Available Copy

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Art Unit:

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09/27/04

Date

Transmitted herewith is an amendment in the above-identified application.

₩as been established by a verified Small entity status of this application under 37 C.F.R. 1.9 and 1.2カ statement previously submitted.

No additional fee is required.  $\boxtimes$ 

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	13	-20	20	**	0	LG=\$18 SM=\$9	18	\$	0
INDEPENDENT CLAIMS FEE	2	-3	3	***	0	LG=\$86 SM=\$43	86	\$	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS  LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145								\$	0
							TOTAL	\$	0

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$\_-0-\_ to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

A check in the amount of \$950 to cover the extension fee is enclosed. A copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. 1.16 for the presentation of extra claims Ø

Any patent application processing fees under 37 C.F.R. 1.17 X

> Respectfully submitted, HOGAN & HARTSÓN L.L.P.

John P. Soherlacher Registration No. 23,009 Attorney for Applicant(s)

Date: September 27, 2004

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